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Scholarship and *The Clinical Teacher*

Editorial for February 2014 issue of *The Clinical Teacher*
Michael Ross

If you are new to *The Clinical Teacher*, you will quickly see that it is not like other journals of medical and health professional education. Your eye may be drawn to the colourful photographs, the very readable text, and the practical application of many of the articles. If you are anything like I was when I read the first issues back in 2004, you may feel the urge to share an article with colleagues, and perhaps not only experienced clinicians, but also non-clinicians, academics and students. You may even find yourself feeling quite excited. I did, and was hooked! I learned that the journal was primarily aimed at practising clinicians involved in education, and it certainly seemed to suit my needs very well at that time when I had just started working in education alongside general practice. Ten years, a reasonable list of publications and a doctorate in education later, however, I am still hooked. I now work one day per week in general practice, but still get involved in teaching and assessing our GP specialist trainees (registrars). I work the rest of the week at The University of Edinburgh, where I teach and assess medical students at all stages, and have particular responsibilities in curriculum development and peer assisted learning. I am also involved in faculty development at all levels from junior doctors learning to teach up to doctoral thesis supervision, and co-direct a Masters in Clinical Education programme. I am fortunate enough to be involved in a number of interesting collaborative research projects around medical students and doctors learning to teach, internationalisation and outcomes-based education, and to be able to indulge my passion for academic writing. It is therefore a particularly special privilege for me to be taking-up the editorial reins of *The Clinical Teacher* together with Professor Jill Thistlethwaite, and to join the excellent editorial and production team in nurturing and shaping this journal for the next phase in its development.

Scholarship

So what makes *The Clinical Teacher* special? I think Boyer's reworking of the old term 'Scholarship' can help us here.¹ Boyer and colleagues studied higher education faculty members and concluded that their work had four separate yet overlapping functions, namely: discovery, integration, application and teaching. Each function, they argue, is vitally important to society and, if approached in a scholarly manner, should be appropriately recognised and rewarded. This would require: 1) Scholarship of discovery, in which new knowledge is generated in many different ways through original research; 2) Scholarship of integration, in which existing knowledge (in the academic literature and elsewhere) within and across disciplines is insightfully and critically reviewed, synthesised, and interpreted in context; 3) Scholarship of application, in which existing knowledge is applied to help understand and address real and important problems in practice; and 4) Scholarship of teaching, in which teaching is approached in a scholarly and reflective manner. It is also vitally important, in my opinion, that each of these functions are reflected in the clinical education

literature if it is to be accessible, relevant and useful to clinicians who teach. Boyer's work has been widely discussed, critiqued and elaborated-upon in the literature.² His colleagues also continued the work by exploring how to measure the quality of scholarship, asking publishers and journal editors what criteria were used when selecting manuscripts for publication, and grant awarding bodies how they decided which proposals to fund.³ Six themes emerged from the findings, suggesting that scholarly work of any kind should have important, clearly-articulated and achievable goals; demonstrate adequate preparation and consideration of existing work in the field; have appropriately selected and applied methods; have significant results which address the goals and contribute to the existing literature; should be presented clearly and effectively for the intended target audience; and should include a reflective critique on the contribution and limitations of the work.^{2, 3}

Scholarship and *The Clinical Teacher*

So what does all this mean for the clinical teacher, and indeed *The Clinical Teacher*? Most academic journals aim to facilitate communication between academic researchers, therefore favouring original research articles. *The Clinical Teacher* is aimed at all clinicians who teach, and all those who teach clinicians – with all their diversity of responsibilities, disciplines, specialisations, interests, backgrounds, training and experience. Some will be actively involved in research themselves and have higher qualifications in clinical education, and some will have organisational and leadership positions in undergraduate or postgraduate education, but the great majority are likely to be clinicians who are primarily responsible for delivering high quality patient care. To many of my clinical colleagues, at least those who know it exists, the medical and health professional education literature can seem inaccessible, irrelevant and detached from the real world of clinical practice. Articles presenting research not directly related to clinical education, or written in incomprehensible academic language, do not help in this regard and therefore will not be published in *The Clinical Teacher*. However, we very much welcome original research articles which will be of interest and value to our target audience, along with other forms of scholarly work in the areas of integration, application and teaching. We also recognise that sometimes the best writers in these other forms of scholarly work may not be the accomplished researchers and academics who already feature prominently in the literature.

Welcoming new views

We will shortly release updated 'Guidelines for Authors' for *The Clinical Teacher*, which will include a new type of 500-word manuscript for structured reflection on important topics in clinical education, based on the principles of good scholarship outlined above. These will replace the 'view from here' articles. Meanwhile, Jill and I would be delighted to hear your views on how you would like to see the journal develop, and any suggestions you have for new scholarly articles which you would find useful to read, and which you think would help us inform, engage and inspire our diverse audience of clinical teachers.

References

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